

State of California STATE WATER RESOURCES CONTROL BOARD



2015-2016

ANNUAL REPORT

FOR STORM WATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

Reporting Period July 1, 2015 through June 30, 2016

Retain a copy of the completed Annual Report for your records.

Please remember that a Notice of Termination and new Notice of Intent are required whenever a facility operation is relocated or changes ownership.

If you have any questions, please contact your Regional Board Industrial Storm Water Permit Contact. The names, telephone numbers, and e-mail addresses of the Regional Board contacts, as well was the Regional Board office addresses, can be found at:

WDID: 2 011002421

http://www.waterboards.ca.gov/water issues/programs/stormwater/contact.shtml

General Information

A. Facility Information

Business Name: Lawrence Berkeley National Lab Physical Address: Strawberry Creek Watershed

City: Berkelev Contact Person: Ron Pauer

State: CA Phone: 510-486-7614

Zip: 94720 Email: ropauer@lbl.gov

Standard Industrial Classification (SIC) Codes: 3499-Fabricated Metal Products, NEC.4214-Loc

B. Facility Owner Information

Business Name: Lawrence Berkeley National Laboratory

Mailing Address: One Cyclotron Road

City: Berkeley Contact Person: Ron Pauer

State: CA Phone: 510-486-7614

Zip: 94720 Email: ropauer@lbl.gov

C. Facility Billing Information

Business Name: Lawrence Berkeley National Lab

Mailing Address: 1 Cyclotron Rd

City: Berkeley Contact Person: Ron Pauer

State: qov.ca.swrcb.sw.baseclasses.State Phone: 510-486-7614

Zip: 94720 Email: ropauer@lbl.gov

FELICIA MARCUS, CHAIR | THOMAS HOWARD, EXECUTIVE OFFICER





2015-2016 Annual Report for WDID 2 01I002421



Question Information

| 1. Has the Discharger conducted monthly visual observations (including authorized and unauthorized Non-Storm Water Discharges and Best Management Practices) in accordance with Section XI.A.1? | | | | | |
|---|--|--|--|--|--|
| Yes No | | | | | |
| If No, see Attachment 1, Summary of Explanation. | | | | | |
| 2. Has the Discharger conducted sampling event visual observations at each discharge location where a sample was obtained in accordance with Section XI.A.2? Yes No | | | | | |
| If No, see Attachment 1, Summary of Explanation. | | | | | |
| 3. Did you sample the required number of Qualifying Storm Events during the reporting year for all discharge locations, in accordance with Section XI.B? Yes No | | | | | |
| 4. How many storm water discharge locations are at your facility? 15 | | | | | |
| 5. Has the Discharger chosen to select Alternative Discharge Locations in accordance with Section XI.C.3? | | | | | |
| Yes No | | | | | |
| 6. Has the Discharger reduced the number of sampling locations within a drainage area in accordance with the Representative Sampling Reduction in Section XI.C.4? | | | | | |
| Yes No | | | | | |
| 7. Select the following Industrial Pollutants at the facility identified in the pollutant source assessment. The table of pollutants are the 303(d) listed impairments for the HUC 10 watershed the facility is located in from water bodies listed in Appendix 3 that are applicable to industrial storm water discharges. | | | | | |
| See Attachment 2 for the List of Identified Pollutants within the Impaired Watershed. | | | | | |



2015-2016 Annual Report for WDID 2 01I002421



| 8. Has the Discharger included the pollutants listed on the final page in the SWPPP pollutant source assessment and conducted analytical monitoring for the pollutants? Yes No | | | | | | |
|--|--|--|--|--|--|--|
| If No, what date will the parameter(s) will be added to the SWPPP and Monitoring Implementation Plan? | | | | | | |
| 9. Were all samples collected in accordance with Section XI.B.5? Yes No | | | | | | |
| If No, see Attachment 1, Summary of Explanation. | | | | | | |
| 10. Has any contained storm water been discharged from the facility this reporting year? Yes No | | | | | | |
| If Yes, see Attachment 1, Summary of Explanation. | | | | | | |
| 11. Has the Discharger conducted one (1) annual evaluation during the reporting year as required in Section XV? | | | | | | |
| Yes No | | | | | | |
| If Yes, what date was the annual evaluation conducted? 05/18/2016 | | | | | | |
| If No, see Attachment 1, Summary of Explanation. | | | | | | |



2015-2016 Annual Report for WDID 2 01I002421



| 12. Has the Discharger maintained records on-site for the reporting year in accordance with XXI.J.3? |
|---|
| 7741.0.0 |
| Yes No |
| If No, see Attachment 1, Summary of Explanation. |
| |
| If your facility is subject to Effluent Limitation Guidelines in Attachment F of the Industrial General |
| Permit, include your specific requirements as an attachment to the Annual Report (attach as file |

ANNUAL REPORT CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel propoerly gether and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: Ron Pauer

type: Supporting Documentation).

Title: Environmental Manager Date: 06/29/2016

2015-2016

Annual Report for WDID 2 011002421

Summary of Explanations

| Explanation Question | | Explanation Text | | | | |
|------------------------|-----------------|------------------|---------------------|---------------|-------------|---------------------|
| Summary of Attachments | | | | | | |
| | Attachment Type | Attachment Title | Description | Date Uploaded | Part Number | Attachment Hash |
| | Supporting | 2015-16 Monthly | Monthly Dry Weather | 06/08/2016 | 1/1 | 19f6e96d2d30b2796b4 |

| Attachment Type | Attachment Title | Description | Date Uploaded | Part Number | Attachment Hash |
|-----------------------------|--------------------------------|--|---------------|-------------|--|
| Supporting Documentation | 2015-16 Monthly Inspections | Monthly Dry Weather inspections | 06/08/2016 | 1/1 | 19f6e96d2d30b2796b4 6cba54a288ab23cddfe f1c56417a53b4546201 4d4652d |
| Supporting Documentation | Annual Evaluation | Annual Evaluation from 05/18/2016 | 05/24/2016 | 1/1 | 35f2ee1340947843abe 8cb065a64a55cbb029 69fe6d814986097ba50 ef4cd6 |
| Supporting Documentation | Sample Event Observations | Sample Event Observations from 11/09/15, 11/24/15, 03/10/16, 04/27/16 | 05/23/2016 | 1/1 | 79f75274b71a9f56cf49 16d35f9fd76f3172cece bff89ab9f9decf74f0ec4 |

2015-2016

Annual Report for WDID 2 011002421

List of Identified Pollutants within the Impaired Watershed

| Parameter | Pollutant | Present at Facility? |
|--|--|----------------------|
| Dacthal | Dacthal | No |
| Diazinon | Diazinon | No |
| Dieldrin | Dieldrin | No |
| Dioxin compounds (including 2,3,7,8-TCDD) | Dioxin compounds (including 2,3,7,8-TCDD) | No |
| E.Coli and Enterococcus | Indicator Bacteria | No |
| E.Coli and Enterococcus | Coliform Bacteria | No |
| Furan Compounds | Furan Compounds | No |
| Metals Screen | Copper | No |
| Metals Screen | Zinc | No |
| Metals Screen | Selenium | No |
| Metals Screen | Mercury | No |
| PCBs (Polychlorinated biphenyls) | PCBs (Polychlorinated biphenyls) (dioxin-like) | No |
| PCBs (Polychlorinated biphenyls) | PCBs (Polychlorinated biphenyls) | No |
| Temperature | Temperature, water | No |
| Total DDT (including DDD, DDE and DDT) | DDT (Dichlorodiphenyltrichloroethane) | No |
| Total chlordane (sum of isomers: cis- and trans- nonachlor, oxychlordane, alpha- and gamma- chlordane) | Chlordane | No |